

Project #:

Work Type:

TOWN OF GROTON

LAND USE APPLICATION
Part One

PLEASE CHECK THE APPROPRIATE BOX(ES) AN	ND ATTACH THE REQUIRED APPLICATION(S):			
☐ SUBDIVISION OR RESUBDIVISION	□ COASTAL SITE PLAN REVIEW (CAM)			
□ SITE PLAN	□ SPECIAL PERMIT			
☐ ADMINISTRATIVE SITE PLAN	□ ZONE CHANGE			
□ INLAND WETLANDS PERMIT	□ REGULATION AMENDMENT			
□ VARIANCE/APPEAL				
PROJECT NAME:				
IF ADDRESS NOT AVAILABLE, LOCATION:				
PARCEL IDENTIFICATION NUMBER:	ACREAGE: ZONE:			
PROJECT DESCRIPTION:				
CORRESPONDENCE WILL BE SENT TO THE PRI	MARY CONTACT AS CHECKED BELOW: TELEPHONE:			
ADDRESS:				
	TELEPHONE:			
	EMAIL:			
	TELEPHONE:			
	ADDRESS:EMAIL:			
□ ENGINEER/SURVEYOR/ARCHITECT:				
ADDRESS:				
EMAIL:	TELEPHONE:			
and map(s) prepared in accordance with the applicable regula 2) The submittal of this application constitutes the property purpose of inspection.	owner's permission for the commission or its staff to enter the property for the d/or address such costs deemed necessary by the Office of Planning and			
SIGNATURE OF APPLICANT DATE OR APPLICANT'S AGENT	SIGNATURE OF RECORD OWNER I HEREBY, CERTIFY THAT I AM THE OWNER OF THE PROPERTY STATED ABOVE			
PRINTED NAME OF APPLICANT	PRINTED NAME OF OWNER			

Fee Received:

Init.

Planner:

TOWN OF GROTON LAND USE APPLICATION - ADMINISTRATIVE SITE PLAN

PART TWO (Attach to Part One)

PLEASE DESCRIBE HOW THE USE/MODIFICA	TION AFFECTS S	SECTION 9.5-1.B OF THE ZONING	
REGULATIONS WITH RESPECT TO ITS EFFEC	T ON THE INTE	NSITY OF THE EXISTING USE, THE	
EXISTING BUILDING FOOTPRINT, TRAFFIC CIRCULATION, PUBLIC SAFETY AND ITS IMPACT ON THE			
SURROUNDING AREA.			
PROVIDE ALL INFORMATION WITH ASP AP	PLICATION AS	LISTED IN SECTION 9.5-1.B.1	
FOR FILL /EXCAVATION APPLICATIONS:			
FILLINGCUBIC YARDS EXC	AVATION	CUBIC YARDS	
FOR SITE MODIFICATION OR ACCESSORY	APARTMENT:		
EXISTING FLOOR AREA (SQ FT)	NEW TO	OTAL FLOOR AREA (SQ FT)	
EXISTING IMPERVIOUS SURFACE (SQ FT)			
CHANGE IN IMPERVIOUS SURFACE (+/- SQ F	(T [*]		
FOR ALL APPLICATIONS: REGULATED WET WETLAND APPLICATION SUBMITTED OR PER			
(To be completed by Planning Division)			
ACTION TAKEN BY DIRECTOR OF PLANNING	3 AND DEVELOP	MENT OR DESIGNEE:	
APPROVED APPROVED WITH N	MODIFICATIONS	3	
MODIFICATIONS			
(if any):			
DENIED/ REASON(S)			
Director of Planning and Development or Desig	nee	Date	